DISCLOSURE SUMMARY PA	AGE		FORM DR-2	DISCLOSURE	
COMMITTEE NAME (Must be same as on Statement of Orga	anization)	ites	(Rev. 12/2005)	REPORT	
Aickinson Counts IMPORTANT: Indicate by # type of committee you are reporting for	y Democra	its	For Office Use C	9060	
(1)Statewide/Legislative/Judge Standing for Retention Candidate (4)County Central Committee (5)County Candidate (6)City Cand Subdivision Candidate (8)County PAC (9)City PAC (10)School (11) Local Ballot Issue	2)State PAC (3)State Party	olitical n PAC	Scanned		
CANDIDATE COMMITTEES ONLY:					
Candidate Name	Political Party (if applicab	e)	File with: lowa Ethics and Disclosure Boar	rd	
Office Sought	District (if Senate or Hous	e)) E. 12 th , Ste. 1A s Moines, Iowa 50319	
Late reports are subject to possible civil and criminal penalties. Pu the candidate, for a candidate's committee, and the chairperson, for ndividual responsible for filing timely and accurate reports.	ursuant to lowa Code section 68B for any other type of committee, is	.32A(7) the			
Janis W. Brant BIGNATURE OF PERSON FILING REPORT	7/ <u>2 332-</u>	2304	L ,/	8/200	
<u> </u>	TELEPHONE		DATES	IGNED	
(report dale)	REPORT FOR (1) ELECT	by # 2	N-ELECTION YE		
AM FILING A (report date) [CHECK IF AMENDMENT TO REPORT DATED [Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.	indicate	Local Co County 8	42, 40,	ate of Election	
(report date) CHECK IF AMENDMENT TO REPORT DATED Check if this is final (termination) report and attach Notice of	indicate	Local Co County 8	mmittees, enter Da	ate of Election	
(report dale) CHECK IF AMENDMENT TO REPORT DATED Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.	indicate	Local Co County 8	mmittees, enter Da	ate of Election	
(report date) CHECK IF AMENDMENT TO REPORT DATED Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed. STATEME! ASH ON HAND at the beginning of the reporting period. (Tota committee. This amount MUST be the same as the care	indicate f Dissolution Form DR-3.) NT OF CASH ON HAND al of all funds held by the ash on hand at the end	Local Co County & which Ele	mmittees, enter Da Local Committees ection is held	ate of Election	
(report date) [CHECK IF AMENDMENT TO REPORT DATED [Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed. STATEME! ASH ON HAND at the beginning of the reporting period. (Total	indicate f Dissolution Form DR-3.) NT OF CASH ON HAND al of all funds held by the ash on hand at the end	Local Co County & which Ele	mmittees, enter Da Local Committees ection is held	enter County in	
(report date) [CHECK IF AMENDMENT TO REPORT DATED [Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed. STATEME! ASH ON HAND at the beginning of the reporting period. (Tota committee. This amount MUST be the same as the ca of the last reporting period or must be zero if this is first ADD TOTAL MONEY TAKEN IN THIS PERIOD	indicate f Dissolution Form DR-3.) NT OF CASH ON HAND al of all funds held by the ash on hand at the end st report filed.)	Local Co County & which Ele	mmittees, enter Da Local Committees ection is held	enter County in	
(report date) [CHECK IF AMENDMENT TO REPORT DATED [Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed. STATEME! ASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the call of the last reporting period or must be zero if this is first ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule)	indicate f Dissolution Form DR-3. NT OF CASH ON HAND al of all funds held by the ash on hand at the end st report filed.)	Local Co County & which Ele	mmittees, enter Da Local Committees ection is held	7 9 7 . 33	
(report date) [CHECK IF AMENDMENT TO REPORT DATED [Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed. STATEME! ASH ON HAND at the beginning of the reporting period. (Tota committee. This amount MUST be the same as the ca of the last reporting period or must be zero if this is first ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule F: Loans Received total (Attach Schedule F)	indicate f Dissolution Form DR-3. NT OF CASH ON HAND al of all funds held by the ash on hand at the end st report filed.) le A) (*also see in-kind below)	Local Co County & which Ele	mmittees, enter Da Local Committees ection is held	7 9 7 . 33	
(report date) [CHECK IF AMENDMENT TO REPORT DATED [Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed. STATEME! ASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the call of the last reporting period or must be zero if this is first ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Received total (Attach Schedule F: Schedule H: Total Sales of Campaign Property (Attach	Indicate f Dissolution Form DR-3. NT OF CASH ON HAND al of all funds held by the ash on hand at the end st report filed.) le A) (*also see in-kind below) th Schedule H)	Local Co County & which Ele	mmittees, enter Da Local Committees ection is held	7 9 7 . 33	
(report dale) CHECK IF AMENDMENT TO REPORT DATED Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed. STATEME! ASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the call of the last reporting period or must be zero if this is first ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Received total (Attach Schedule F: Schedule H: Total Sales of Campaign Property (Attact (Schedule H applies to Candidates' Comm	indicate f Dissolution Form DR-3. NT OF CASH ON HAND al of all funds held by the ash on hand at the end st report filed.) le A) (*also see in-kind below) th Schedule H)	Local Co County & which Ele	mmittees, enter Da	7 9 7 . 33	
(report date) CHECK IF AMENDMENT TO REPORT DATED Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed. STATEME! ASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the call of the last reporting period or must be zero if this is first ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Received total (Attach Schedule F: Schedule H: Total Sales of Campaign Property (Attach	Indicate f Dissolution Form DR-3. NT OF CASH ON HAND al of all funds held by the ash on hand at the end st report filed.) le A) (*also see in-kind below) th Schedule H)	Lucal Co County 8 which Ele	mmittees, enter Da Local Committees ection is held	7 9 7 . 33	

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

CONSULTANT BREAKDOWN (Schedule G Attached?)

CANDIDATE COMMITTEES ONLY:

be zero) (Attach DR-3).....\$

\$

____ NO

YES

6014.59

For instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(including candidate's personal funds)	(Rev. 06/97)	RECEIPTS
Sickinson County Semocrats		CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLLIMIN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
3/25/07	ID# CK#	Jim Benn 15357 212th ave. Spirit Lake, Ja51360		\$ 80	V
3/25/07	ID# CK#	Steve Litter 15532 Harlow Dr. Spirit Raker, Ja 51360		280	V
	ID# CK#	Tina Bauermeister 25773 169th St. Spirid Lake, Ja 51360		55	v
"	ID#	Tim Mc Strath. 3604 Lakeshore Grew Okobyo, Ja 51395		80	V
4	ID# CK#	Laura Stevene 23 438 221 St		15	ν
",	ID# CK#	Hank Miguel 1309 Julia St. Okolfin Ja 51355		80	v
	ID# CK#	Avig Singel 31301, 250 en Jst. Terril, 12 51364		80	V
l i	ID# CK#	Ken Glacris 408 Lake Street Spirit Lake, Ja 51360		150	w
1,	ID# CK#	John Sunders 2711 Hung 9 Spirit Lake, 1a 51360		55	W
,,	ID# CK#	Josephine Green 11202 270th ave. Spirit Lake, Sa 51360		80	V
			SUB-TOTAL	1015	

TOTAL (if last page of this schedule)

Page ____ of ______

SCHEDULE

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by manage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Lickeinson County Democratul

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOF FUND- RAISER INCOME
3/25/07	ID# CK#	Nancy Reiman 197 22nd street Spirit Rake, Ja 5 1360		\$ 100	V
<i>, l</i>	CK#	Jan Bortscheller 902 24 th Suet Spirit Lake, Ja 51360		75	·
11	ID#	Betty Sneitzer 14 29 India D Hills Dr Spirit Lake, Ia 51360		55	v
+ 4	ID# CK#	Sara Koepp 1212 11 th St migna, Ja 51351		55	v
′1	ID# CK#	Bol- Reed 2241 165th Street Spirit Lake, Sa 51360		/30	v
1,	ID# CK#	Bart Rickel 2404 Chicago acence Spirit Lake, Ja 51360		55	v
′,	ID# CK#	John Senni Box 100 Sand Fake Ja 51360		/30	v
. /1	ID# CK#	Marjean Wigner 15560 Landings ave. Spirit Lake, Ja 51360		80	v
11	ID# CK#	John Djørnstad 1325 Sussimer Circle Okoloni, Ja 51355		65	B
H	ID# CK#	Denny Perry 101 119th Great Spirit Lake, 1a 51360		130	i.
			SUB-TOTAL	175	

TOTAL (if last page of this schedule)

Page 2 of 4 (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguirity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same	e as on Statement of Org	ranization)
Dickinson	<i>A</i> -	4

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
3/27/07	ID# CK#	Jan Grant 3612 Fairfield St. Okolojo, La 51355		\$ 65	INCOME
) (ID# CK#	Chuck Reed 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		280	V
11	ID# CK#	Joe Fitzgiblona 6805 fakt form Dr. Okobyi, la 51355		530	in
"	ID# CK#	alice Meppel 15694 21321, ave. Spirit Lake, Ja 51360		730	v
",	ID# CK#	James Coener (Confidential actions)		100	v
14	CK#	Uniterrined contributions from membership dinner + fundaciser	e e	650	r
e)	ID#	Tom Bedell PO Box 557 Spirit Lake, Ja 51360	enga i	500	
Quarterly	ID# 25.04 49.24 CK# 55.64 780.33	Bente Midwest Savinger 1102 Sonborn are. Okologi, La 51355 (Interes		180.33	
Monthly.	ID# CK#	Bank Midwest Checking 1102 Lanborn ave Okoboji, Ja 51355 (Interes		2.27	
1/4/07	ID# CK#	Committee to Elect That Berryon for Senate 1203 H avenues Milford, Ja 51351	ul	100	
			SUB-TOTAL		

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consunguistry (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 4 (for Schedule A)

TOTAL (if last page of this schedule)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 07/03)

MONETARY RECEIPTS

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)	
Dickinson County Democrats	
STATE CAMPIDATES NOTE IT A SOUTH IN A SOUTH	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
Various	ID# CK#	Uniterrined contributions for DED memberships	·	\$785	
8/14/07	ID# CK#	Mary Luchtel 1434 210th avenue Spirit Lake, Ja 51360		100	
8/23/07	ID# CK#	Sale of T- shirts and unitering from pience		122	[V
5/1/07	ID# CK#	Berkley Redell 15712 Dusty Road Spirit Lake, Ja 51360		200	
	ID# CK#				
	ID# CK#				
	ID# CK#		·		
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL

TOTAL (if last page of this schedule)

s 5634.60

Page ______ of _____

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
☐ CHEC	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) Uckenson emocrats CANDIDATE NAME AND ADDRESS TO WHOM **PURPOSE AMOUNT** DATE ID NUMBER **EXPENDITURE** (DESCRIBE TRANSACTION) **EXPENDED EXPENDED** (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# Carolyn Vincello March 25 Fundraiser 3/14/07 postagi (400 stampa @ 244) CK# 7/7 Sperit Loke, Ja \$ 96.00 Lee Nation, Otlas Stomp + Seal Co. 3/19/07 CK# 7/8 10.16 3225 Center Lake Dr. wit Lake, Ja 51360 ID# Jackie Olson List from courty ordered from county courtbace 408 Lake Street 3/19/07 CK# 7/9 13.00 Spirit Lake, Sa ID# The Som Deposit for fundraising dinner to be held 3301 Lakeshore Dr. 3/20/07 CK#720 100-00 Okobiji, ta 51355 3/25/01 ID# Deposit for 2008 Dickinson County Agricultural Society.
Expo Center
Sperit Lance, Iswa
The Inn CK# 721 3/20/07 300,00 3301 Latertine dr. Okoboji, Sa 51355 ID# Meals for fundraiser 3/30/07 CK# 724 980.00 ID# Deluje Checks!-Bank midwest Po Box 979 Okoloji, Ja Check blanks 3/27/07 CK# 15.75 Dick Co Cable News Kundraiser dinner 4/13/07 PO Box 213 CK# 225 ad on TV *30.00* Milford, & 51351 SUB-TOTAL 1544.91 TOTAL (if last page of this schedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page	1	Ωf	3
		٠,	

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES		
CHECK THIS BOX IF AMENDING FORM			

COMMITTEE NAME (Must be same as on Statement of Organization) Dickinson Counter Domogratal

du	crinson	_ (ounter Democ	erots	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4/13/07	ļ	Chuck Reed 2282 165th St. Spirit Lake, Ja 5730	The State Litho reimburament for fundacises postcards	\$ 66.34
4/13/07	ID# CK# 752	Laker News Shipp 1009 22 Street Milford, La 51351		28.25
7/26/07	ID# CK# 753	US Postal Service Okoboji, la 51355	PO box rental for year	26.00
8/7/07	ID# CK# 754	Carolyn Vincelli 607 9th St. Spirit Lake, Sa	and 100 stampe @ 264 for pienie	47.40
8/7/07	ID# CK# <i>755</i>	Screen Printing. 1612 202 St. Milford, Sa 51351	Porode t-shirts- Mainiail	278.03
10/17/07	ID# CK# 756	Denny Perry 101 19th Street Spirit Lake, Sa 51360	Carecus 2008 preparations voter disc, stamps, envelopes, copies	107. 29
	ID# CK# <i>757</i>	Jan Grant 3612 Fairfield St. Okoloji, La 51355	20 stamps @ 41 \$ copies 97\$	9.54
11/13/07	ID# CK# 758	Amejo Sign Deugh 80 Box 155 Arnolds Paste, SA	Signs for January 2008 caucus	214.00
		5/33/	SUB-TOTAL TOTAL (if last page of this schedule)	\$ 776.85
			TOTAL (if last page of this schedule)	e

TOTAL (if last page of this schedule) | \$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 02/96)	MONETARY EXPENDITURES		
CHECK THIS BOX IF			

COMMITTEE NAME (Must b	e same as on Statem	ent of Organization)
	County	Δ · · · · · · · · · · · · · · · · · · ·

		coming remocrais			
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAMÉ/AND ADDRESS TO WHOM EXPEN (Disbursement) WAS MADE	DITURE	PURPOSE (CANDIDATES SEE BELOW & ENTER 1,2,3)	AMOUNT EXPENDED
12/17/07	ID# CK# 759	Jackie Alson 408 Lake Street Spirit Lake, Sa		I Co. Auditor for cancer-	\$ 15.00-
12/17/09	ID# CK# 760	Denny Perry 101 19th Street Spirit Fake, La 51360	Cancus Bent Son Communid post ca	Eypenses - na Laker ty College (room teds, signs	1,57.26
12/17/07	CK# 761	Chuck Reed 2282 165th St. Spirit Lake, Ia 51360	Stanne	sedell blate exercation for pien(ic)	
	CK#			()	
	ID# CK#			()	
	ID# CK#			()	
	ID# CK#			()	

SUB-TOTAL

\$295.58

TOTAL (if last page of this schedule)

\$26/7.34

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Campaign funds may be used only for:

- (1) campaign purposes,
- (2) constituency expenses, and
- (3) educational and other expenses associated with duties of office.

Please insert the applicable number in the purpose column for each expenditure.

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)